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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

	or Other Than An Autl	_	Office Us	se Only
NAME OF TOO COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
DEMOCRATS FOR ED	OUCATION REFORM	1		
ADDRESS (number and street)	840 FIRST STREET NE, 3R	D FLOOR		
Check if different than previously reported. (ACC)	WASHINGTON		DC 20002	
2. FEC IDENTIFICATION NUI	MBER ▼ CIT	Y 🛦	STATE ▲	ZIP CODE A
C C00417733		S THIS X NEW (N) OI	AMENDED (A)	
4. TYPE OF REPORT (Choose One)	Report	20 (M2) May 20 (M	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On: Mar	20 (M3) Jun 20 (M	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15		20 (M4) X Jul 20 (M7	Oct 20 (M10)	Jan 31 (YE)
Quarterly Report (Q1 July 15 Quarterly Report (Q2	PRF-Election	Primary (12P) Convention (12C)	General (12G) Special (12S)	Runoff (12R)
October 15 Quarterly Report (Q3				
January 31 Year-End Report (YE	Electio	n on	/	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Electio	n on /	/ Y = Y = Y	in the State of
5. Covering Period 06	01 2016	through 06	M / D D / Y Y Y 30 201	6
I certify that I have examined this	Report and to the best of	my knowledge and belief it is	true, correct and complet	e.
Type or Print Name of Treasurer	Joe Williams			
Signature of Treasurer Joe Wi	Iliams	[Electronically Filed]	Date 07 / 19	2016
NOTE: Submission of false, erroned	ous, or incomplete information	n may subject the person signing	g this Report to the penaltic	es of 2 U.S.C. §437g.
Office Use Only				FORM 3X ev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

DEMOCRATS FOR EDUCATION REFORM

2016 06 30 2016 Report Covering the Period: 06 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 13791.23 January 1, 2016 (b) Cash on Hand at 10618.34 Beginning of Reporting Period..... 0.00 25.66 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 13816.89 10618.34 6(a) and 6(c) for Column B)..... 946.85 4145.40 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 9671.49 9671.49 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 9500.00 Schedule C and/or Schedule D)

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

DEMOCRATS FOR EDUCATION REFORM

eport Covering the Period: From: 06	012016	To: 06 30 2016 COLUMN B
I. Receipts	Total This Period	Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	25.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	0.00	25.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines	, , , , , , , , , , , , , , , , , , , ,	
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	0.00	25.00
Transfers From Affiliated/Other	7	7
Party Committees	0.00	0.00
Tarty Committees	7 7	
All Loans Received	0.00	0.00
All Loans Heceived		7 7
	0.00	0.00
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.66
Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(a) Zariii i anaa (irani aanaaana ria) iiiniiii	7	7
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	0.00	25.66
Total Federal Receipts	200	
(subtract Line 18(c) from Line 19)▶	0.00	25.66

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)			
	(i) Federal Share	0.00	0.00	
	(ii) Non-Federal Share	0.00	0.00	
	(b) Other Federal Operating			
	Expenditures	756.85	3955.40	
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	756.85	3955.40	
22.	Transfers to Affiliated/Other Party	100.00		
	CommitteesContributions to	0.00	0.00	
	Federal Candidates/Committees and Other Political Committees	190.00	190.00	
	Independent Expenditures	0.00	0.00	
25.	(use Schedule E) Coordinated Party Expenditures			
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00	
26.	Loan Repayments Made	0.00	0.00	
7	Lacra Mada	0.00	0.00	
28.	Loans MadeRefunds of Contributions To:			
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
	//-> Dalitical Banks Occurrent	0.00	0.00	
	(b) Political Party Committees (c) Other Political Committees	0.00	3.50	
	(such as PACs)	0.00	0.00	
	(d) Total Contribution Refunds			
	(add Lines 28(a), (b), and (c))▶	0.00	0.00	
29.	Other Disbursements	0.00	0.00	
	Other Dispursements	0.00	3.00	
	Federal Election Activity (2 U.S.C. §431(20))			
	(a) Allocated Federal Election Activity (from Schedule H6)			
	(i) Federal Share	0.00	0.00	
	(ii) III ovinii Chara	0.00	0.00	
	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	7		
	With Federal Funds	0.00	0.00	
	(c) Total Federal Election Activity (add	0.00	0.00	
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶		0.00	
	Total Disbursements (add Lines 21(c), 22,			
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	946.85	4145.40	
32.	Total Federal Disbursements			
	(subtract Line 21(a)(ii) and Line 30(a)(ii)			
	from Line 31)	946.85	4145.40	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	25.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	25.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	756.85	3955.40
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.66
8. Net Operating Expenditures (subtract Line 37 from Line 36)	756.85	3954.74

CHEDULE B (FEC Form 3X)	Han an arrange to the Co	FOR LINE NUMBER: PAGE 6 OF 9		
EMIZED DISBURSEMENTS	Use separate schedule(for each category of the Detailed Summary Page	(official offin)	one) 22 23 24 25 2 28a 28b 28c 29 3	
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NAME OF COMMITTEE (In Full) DEMOCRATS FOR EDUCATION	,	nicai committee to	Solicit contributions from Such committee.	
Full Name (Last, First, Middle Initial) Authorize.net			Date of Disbursement	
Mailing Address P.O. Box 8999			06 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
San Francisco	State Zip Code CA 94128		Transaction ID : SB21B.4449	
Purpose of Disbursement Credit Card Processing Fees			Amount of Each Disbursement this Period	
Candidate Name		Category/ Type	30.00	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) Global Payments			Date of Disbursement	
Mailing Address 10 Glenlake Parkway NE North To	ower		06 02 2016	
Atlanta	State Zip Code GA 30328		Transaction ID : SB21B.4450	
Purpose of Disbursement Credit Card Processing Fees Candidate Name		Category/	Amount of Each Disbursement this Period	
Office Sought: House Disburse	ment For:	Type	82.85 Memo Item	
Senate President	Primary General Other (specify) ▼			
State: District: Full Name (Last, First, Middle Initial)				
Idealist.org			Date of Disbursement	
Mailing Address 302 Fifth Avenue			06 23 2016	
New York	State Zip Code NY 10001		Transaction ID : SB21B.4454	
Purpose of Disbursement Job Placement Notices			Amount of Each Disbursement this Period	
Candidate Name		Category/ Type	720.00	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		Memo Item	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) DEMOCRATS FOR EDUCATION REFORM Full Name (Last, First, Middle Initial) Trilogy Interactive LLC Mailing Address P.O. Box 4177 City State Zip Code Mountain View CA 94040 Purpose of Disbursement Less in-kind Contribution to Candidate, See Line 23 Candidate Name Candidate Name Disbursement For: Senate Primary General Other (specify) Type Office Sought: House Senate Primary General Other (specify) Type Office Sought: House Senate Primary General Other (specify) Type Office Sought: House Senate Primary General Other (specify) Type Office Sought: House Senate Primary General Other (specify) Type Office Sought: House Senate Primary General Other (specify) Type Office Sought: House Senate Primary General Other (specify) Type Office Sought: House Senate Primary General Other (specify) Type Office Sought: House Senate Primary General Other (specify) Type Office Sought: House Senate Primary General Other (specify) Type Office Sought: House Senate Primary General Other (specify) Type Office Sought: House Senate Primary General Other (specify) Type Office Sought: House Senate Primary General Other (specify) Type Office Sought: House Senate Primary General Other (specify) Type Office Sought: House Senate Primary General Other (specify) Type	SCHEDULE B (FEC Form 3X)	Lico conorato cobadula(=)	FOR LINE NUMBER: PAGE 7 OF 9		
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Trilogy Interactive LLC Mailing Address P.O. Box 4177 City State Zip Code CA 94040 Purpose of Disbursement Less in-kind Contribution to Candidate. See Line 23 Candidate Name Clast, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement To: Senate Prisident Other (specify) ▼ State: Disbursement Candidate Name Category/ Type Date of Disbursement this Perioc Category/ Type Date of Disbursement this Perioc Category/ Type Date of Disbursement Candidate Name Category/ Type Memo Item Amount of Each Disbursement this Perioc Category/ Type Memo Item Date of Disbursement this Perioc Category/ Type Memo Item Amount of Each Disbursement this Perioc Category/ Type Memo Item Amount of Each Disbursement this Perioc Category/ Type Memo Item Date of Disbursement this Perioc Category/ Type Memo Item Amount of Each Disbursement this Perioc Category/ Type Memo Item Amount of Each Disbursement this Perioc Category/ Type Memo Item Memo Item Memo Item State: Disbursement To: Senate Primary General President Disbursement To: Senate Primary General Primary General Primary General Primary General Primary General District Memo Item Memo Item Memo Item Memo Item Memo Item	NAME OF COMMITTEE (In Full) DEMOCRATS FOR EDUCATION F	•	i committee to	SOUCH CONTINU	unons from Such Committee.
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Mountain View CA 94040 Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code President State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Other (specify) ▼ Memo Item Transaction ID: SB21B.4456 Amount of Each Disbursement this Period Amount of Each Disbursement Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type Memo Item	Mailing Address P.O. Box 4177				
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Office Sought:				Amount of I	Each Disbursement this Period
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) DEMOCRATS FOR EDUCATION REFORM Full Name (Last, First, Middle Initial) A. Trilogy Interactive LLC Mailing Address P.O. Box 4177 City State Zip Code Candidate Name SEAN BARNEY Office Sought: House Disbursement For: 2016 Senate President State: DE District: of Turpose of Disbursement Category/ Type Date of Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: 2016 State: DE District: of Turpose of Disbursement Tor: 2016 Senate President State Zip Code Purpose of Disbursement Tor: 2016 Category/ Type Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: 2016 Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Type Disbursement For: Senate Primary General Other (specify) Type	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	_	FOR LINE NUMBER: PAGE 8 OF 9 (check only one)		
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) DEMOCRATS FOR EDUCATION REFORM Full Name (Last, First, Middle Initial) Transaction ID: SB23.4457 Amount of Each Disbursement this Period Category/ Type Office Sought: House President State: Zip Code City State Zip Code Category/ Type Office Sought: House Disbursement For: 2016 State: DE District: Of Disbursement Candidate Name Category/ Type Office Sought: House Primary General Other (specify) ▼ Disbursement This Period Category/ Type Office Sought: House Primary General Other (specify) ▼ Mailing Address City State: District: Other (specify) ▼ Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Primary General Other (specify) ▼ Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Primary General Other (specify) ▼ Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Memo Item Memo Item Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Memo	ILEMIZED DISBURSEMENTS	for each category of the	21b	22 🗙 23 🔲 24 📗 25 📉 26		
NAME OF COMMITTEE (in Full) DEMOCRATS FOR EDUCATION REFORM Full Name (Last, First, Middle Initial)						
An Trilogy Interactive LLC Mailing Address P.O. Box 4177 City State Zip Code CA 94040 Purpose of Disbursement In-kind: Internet Solicitation Candidate Name SEAN BARNEY Office Sought: Senate President State Disbursement For: 2016 Full Name (Last, First, Middle Initial) State: District: Disbursement Category/ Type Office Sought: House Senate President State: Disbursement For: 2016 Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) State: District: District: Full Name (Last, First, Middle Initial) State: District: District: District: District: District: District: Senate President State: District: Distri	NAME OF COMMITTEE (In Full) DEMOCRATS FOR EDUCATION F	· ·				
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Mountain View	Mailing Address P.O. Box 4177			06 30 2016		
Purpose of Disbursement In-kind: Internet Solicitation Candidate Name SEAN BARNEY Office Sought:				Transaction ID : SB23.4457		
SEAN BARNEY Office Sought:	Purpose of Disbursement	CA 94040				
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	SUBTOTAL of Disbursements This Page (ontional)			190.00		
	COLIGINE OF PRODUCTIONS THIS Laye (optional)			7 7 7		

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 9
FOR LINE NUMBER: (check only one)

9 **X** 10

OF

NAME OF COMMITTEE (In Full) DEMOCRATS FOR EDUC	ATION REFORM		
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Whitney W. Burns			Nature of Debt (Purpose): Financial Compliance
Mailing Address P.O. Box 1174			
City State Springfield	Zip Code VA	22151	_
Outstanding Balance Beginning T			Transaction ID : SD10.4397
950	00.00		
Amount Incurred This Peri	od Payn	nent This Period	Outstanding Balance at Close of This Period
	0.00	0.00	9500.00
B. Full Name (Last, First, Middle Ini	tial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address			_
City State	Zip Code		
Outstanding Balance Beginning T			
Amount Incurred This Peri		nent This Period	Outstanding Balance at Close of This Period
		7	
C. Full Name (Last, First, Middle Ir	litial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	
Outstanding Balance Beginning T	his Period		
Amount Incurred This Peri	od Paym	nent This Period	Outstanding Balance at Close of This Period
1) SUBTOTALS This Period This Pag	e (optional)	>	9500.00
2) TOTALS This Period (last page this	s line number only)	>	9500.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)			0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶			9500.00